

Homelessness Counts in Lake County

*Lake County Point-in-Time Count Report
for the night of January 28, 2010*



Community Development Division
Planning, Building & Development Department

*Data gathered from the Lake County
Homeless Management Information System (HMIS)*



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I. Introduction

On January 28, 2010, the Lake County Continuum of Care (a group of homeless service providers) conducted its annual Point-in-Time Count (PIT Count). The PIT Count is like a census – it is an attempt to enumerate the homeless population and gather important information about who they are and what they need.

As a requirement of the US Department of Housing & Urban Development (HUD), each Continuum of Care across the country must conduct a PIT Count during the last days of January for a variety of reasons. The HUD Office of Community Planning & Development released a document in January 2008 entitled *A Guide to Counting Sheltered Homeless People*, which provides an excellent explanation of the primary reason for conducting a PIT Count:

The most important reason to collect information on the number and characteristics of sheltered homeless people is for program planning. To be responsive to the needs of homeless persons in the community, a CoC needs to understand how many singles, families, and children are being served through its homeless service system and what their needs are. Current and accurate data on the number and characteristics of homeless persons in the community enable the CoC to adjust the types of services available according to need and to use resources as efficiently as possible. For example, if shelters for families with children are continually operating below full capacity, and shelters for single women frequently rely on overflow beds, then the CoC may want to examine eligibility requirements to consider allowing single women to be served within the family shelter programs.

Knowing who is homeless allows the decision makers within the Lake County Continuum of Care to make informed decisions. Otherwise, developing shelters and other programs is nothing more than a guess. Another example, similar to the one above – an organization may be considering developing a new homeless shelter for women. However, the PIT Count shows that there is a much larger number of men in need of shelter. The program that the organization is considering would not be appropriate.

The PIT Count is divided into two parts – the sheltered count and the unsheltered count. The results of each component are combined to provide a comprehensive analysis of the homeless population in Lake County.

A. Sheltered Count

The first group of persons to be counted are those that are currently in some form of shelter. These shelters include: emergency shelter; transitional housing; hotel/motel vouchers; “safe havens;” and participants in rapid re-housing programs.

Persons who would otherwise be homeless but are in other types of shelter are not counted. These types include (with some exceptions): permanent supportive housing for the homeless; jails/prisons; hospitals; treatment facilities; and hotel/motel paid for without a voucher.

Regularly, over 95% of the persons counted are in shelter. HUD mandates the PIT Count to be during the last days of January as that is a time that is usually very cold and homeless persons will seek shelter. Counting is much easier to accomplish when persons are in shelter.

Sheltered persons are counted through two means. First is through a survey that is sent to homeless service providers and is completed for persons in the program on one specific night – in this case, January 28, 2010. The second is through the Homeless Management Information System (HMIS). Many homeless service providers participate in the HMIS, and enter demographic data about their clients into the system. The system can also be used for case management and information & referral, among other things. However, for the PIT Count, a report is generated that provides non-identifying demographic information about persons in shelter on the night of the PIT Count. These two sources are combined in order to complete the sheltered count.

1. Homeless Management Information System (HMIS)

In 2001, Congress directed HUD on the need for data and analysis on the extent of homelessness and the effectiveness of the McKinney-Vento Act Programs including:

- Developing unduplicated counts of clients served at the local level
- Analyzing patterns of use of people entering and exiting the homeless assistance system
- Evaluating the effectiveness of these systems

HUD's response was to mandate the use of Homeless Management Information Systems (HMIS). According to HUD, an HMIS is "a software application designed to record and store client-level information on the characteristics and service needs of homeless persons. An HMIS is typically a web-based software application that homeless assistance providers use to coordinate care, manage their operations, and better serve their clients."

Lake County Community Development staff currently administers the Lake County HMIS. Partially supported by a grant through the Continuum of Care, the Lake County HMIS uses Bowman Systems' ServicePoint software. In late 2009, additional funding was received in order to expand and strengthen the County's HMIS by hiring a full time system administrator. This PIT Count is the first with a full time system administrator, and the results include better data quality and more accurate reporting.

B. Unsheltered Count

The second group of persons to be counted are homeless persons that are not in shelter. This is a much more difficult task. Persons who do not seek shelter have any number of hiding spots in which to sleep. In addition, with the recent increase in foreclosures and abandoned buildings, many more homeless persons are taking up residence in those buildings. Finding all of these hiding places is a nearly impossible task.

In order to find as many unsheltered persons as possible, volunteers from numerous organizations literally hit the street in the middle of the night to search for persons. This year, 28 volunteers in 10 teams went out between the hours of 10:00pm and 2:00am to find as many persons as possible.

These teams did not just search randomly. A focus group of homeless persons was held before the PIT Count where information was sought regarding "hot spots" or known locations. The teams checked out these areas and other places known to be favored by homeless persons.

The count also became an outreach activity. Every person that was found was offered transportation to a shelter. The hope is that they would become engaged in the system and receive the assistance they need.

II. WHAT?

Homelessness is a very complex and misunderstood issue. It is also difficult to define who is truly homeless. The United States Code contains the official federal definition of homeless, which is the definition this report follows. Title 42, Chapter 119, Subchapter I defines homeless. The relevant portions of the definition are:

§11302. General definition of homeless individual

(a) In general

For purposes of this chapter, the term "homeless" or "homeless individual or homeless person" includes-

1. an individual who lacks a fixed, regular, and adequate nighttime residence; and
2. an individual who has a primary nighttime residence that is -
 - A. a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill);
 - B. an institution that provides a temporary residence for individuals intended to be institutionalized; or
 - C. a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

...

(c) Exclusion

For purposes of this chapter, the term "homeless" or "homeless individual" does not include any individual imprisoned or otherwise detained pursuant to an Act of the Congress or a State law.

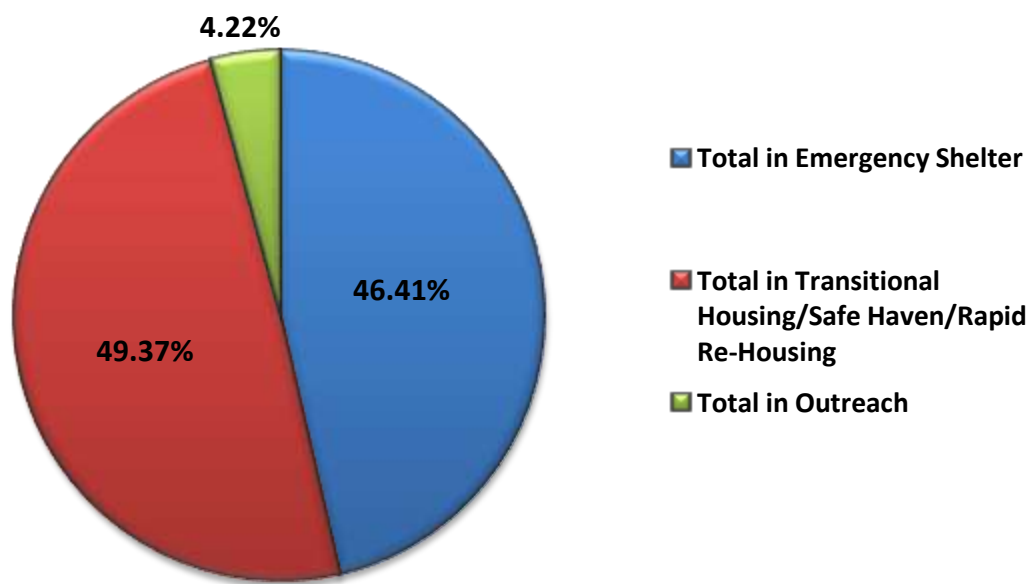
474

*Persons in Lake County who met the federal
definition of homeless on January 28, 2010*

III. WHERE?

A. Locations

The 474 persons counted were found in both sheltered and unsheltered locations. The sheltered persons were in both emergency shelter and other types of housing for homeless persons. The unsheltered persons (20 total) were found in locations throughout Lake County.



Most persons who experience homelessness will at some point be in an emergency shelter of some type. They then move along that literal continuum of care to transitional housing and ultimately affordable permanent housing. The following programs provide shelter or other housing to homeless persons.

Emergency Shelter Programs	Transitional Housing/Safe Haven/ Rapid Re-Housing Programs
A Safe Place Domestic Violence Shelter	A Safe Place Transitional Living
Catholic Charities Motel Vouchers	Alexian Brothers – The Harbor
Catholic Charities – Samaritan House	Catholic Charities – Mary Pat Maddex Place
Lake County Haven Shelter	COOL Transitional Housing
Maristella Motel Vouchers	Lake County Haven Stage II
PADS – Rotating Site Shelter	North Chicago VA Medical Center
PADS – The Center	PADS Safe Haven
Warren Township Motel Vouchers	PADS/Catholic Charities Rapid Re-Housing Program
	Waukegan Township Staben Center
	Waukegan Township Staben House

In addition to all of these programs, there are a number of programs that provide permanent supportive housing beds for homeless persons with disabilities. These persons would be homeless without these programs, but for the purposes of this count, they are not considered homeless. Lake County currently has 96 permanent supportive housing beds.

B. Capacity

The following table illustrates the capacity of each program for homeless assistance. As this PIT Count is just a snapshot census, it does **not** mean that any program is regularly at these levels. Some programs may have been over capacity on that night, while some may have been under. The very next night, it may have been reversed. Regular “Bed Utilization Reports” are used to determine capacity issues.

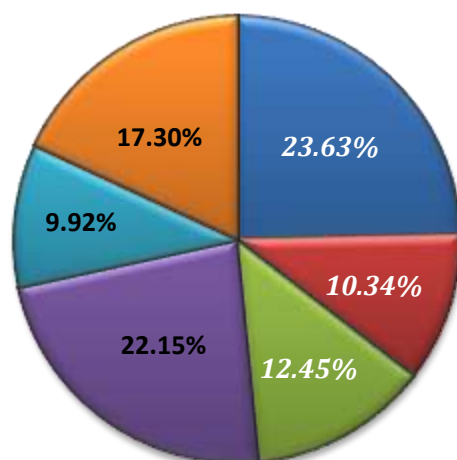
	Provider Name	Bed Capacity	Beds Used	Utilization Rate
HMIS Participating Agencies	Alexian Brothers – The Harbor	9	4	44%
	Catholic Charities / Motel Vouchers	27	27	n/a
	Catholic Charities / Mary Pat Maddex	31	17	55%
	Catholic Charities / Samaritan House	22	18	82%
	COOL - Transitional Housing	22	27	123%
	Lake County Haven / Shelter	10	10	100%
	Lake County Haven / Stage 2	23	19	83%
	PADS Rotating Site Shelters	100	99	99%
	PADS Safe Haven	15	13	87%
	PADS The Center	42	41	98%
	Waukegan Township Staben Center	17	11	65%
	Waukegan Township Staben House	16	16	100%
Subtotal		334	302	90%
Non-HMIS Participating Agencies	A Safe Place DV Shelter	35	10	29%
	A Safe Place Transitional Living	49	38	78%
	Maristella Motel Vouchers	14	14	n/a
	PADS/CC – Rapid Re-Housing	22	22	n/a
	North Chicago VA Medical Center 1	45	44	98%
	North Chicago VA Medical Center 2	17	15	88%
	Warren Township Motel Vouchers	9	9	n/a
	Outreach (unsheltered)	20	20	n/a
Subtotal		211	172	82%
TOTAL		545	474	87%

The following is also a list of the permanent housing beds that have persons who would otherwise be homeless. They were homeless at one time.

Organization	Program	Beds for Households with Children	Units for Households with Children	Beds for Households w/o Children	Beds for the Chronically Homeless	Total Year-Round Beds
Lake County Health Dept.	Shelter Plus Care	26	10	28	8	54
Independence Center	Indiana Properties	0	0	8	3	8
PADS Crisis Services	Permanent Housing	0	0	10	10	10
Shields Township	CTI-RP Program	0	0	24	24	24
TOTAL		26	10	70	45	96

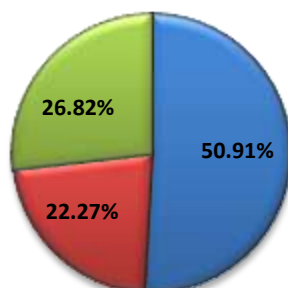
C. Housing Type

Sheltered locations contained both single adult individuals and persons in families. The following chart shows the breakdown between those groups in both emergency shelters and transitional housing (including safe havens and rapid re-housing programs).



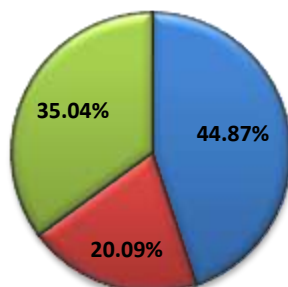
- **Emergency Shelter - Single Adults**
- **Emergency Shelter - Adults in Families**
- **Emergency Shelter - Children**
- **Transitional Housing - Single Adults**
- **Transitional Housing - Adults in Families**
- **Transitional Housing - Children**

Emergency Shelter



- **Single Adults**
- **Adults in Families**
- **Children**

Transitional Housing



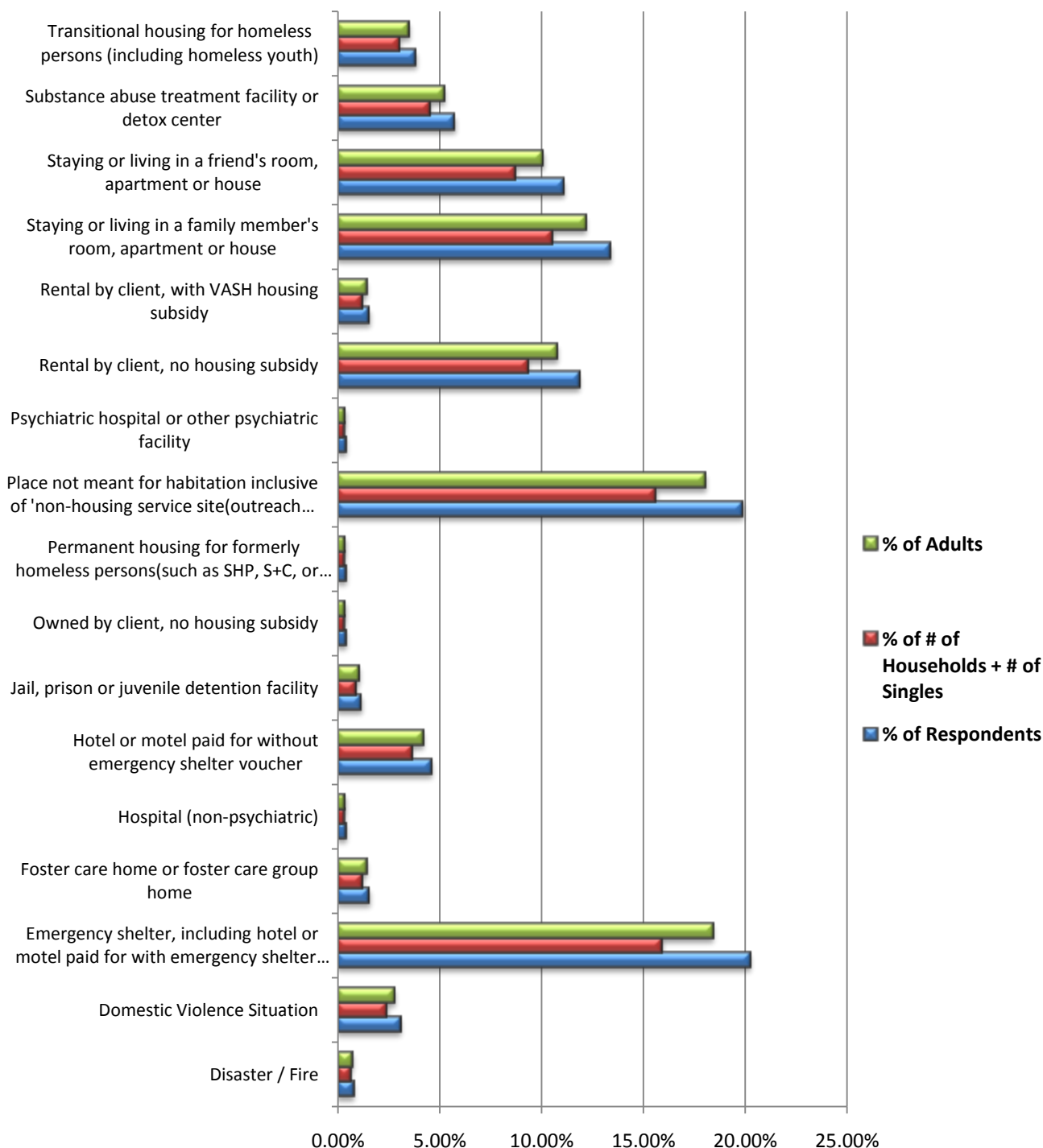
The charts to the left illustrate the percentage of single adult individuals, adults in families, and children in families in each of the different types of housing.

There is a significantly higher percentage of children in transitional housing than there is in emergency shelters. However, there are likely just as many children, if not more, who stay in emergency shelter over a period of time – families just tend to get out of emergency shelter as quickly as possible.

There is also a higher percentage of singles in emergency shelter than transitional housing. However, a significant percentage of the singles in transitional housing are participants in the North Chicago VA Medical Center's programs. There are limited options for transitional housing for singles.

D. Previous Housing

The following chart shows where persons stayed the night before entering a program (*note – only one answer is given per household*). It helps to determine what the needs of persons experiencing homelessness may be. For example, if there is a significant increase in evictions, eviction prevention programs may be the best solution.

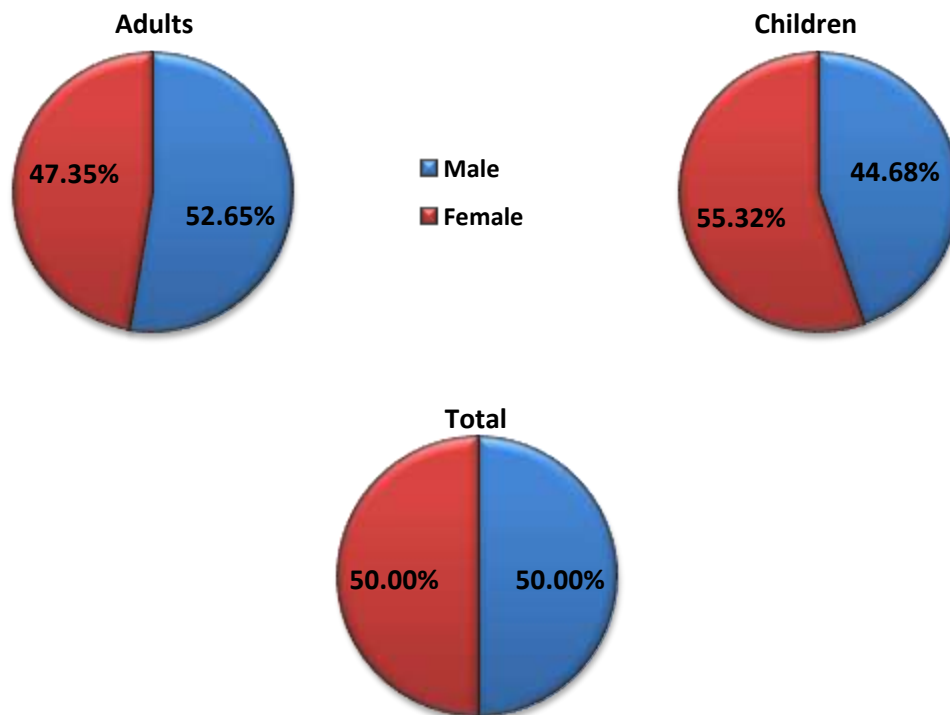


IV. WHO?

A. Gender

As mentioned in a previous example, the gender of homeless persons can help determine what types of programs the Continuum of Care should be developing. Of all the people counted, exactly half were male and half were female.

However, the gender of adults and the gender of children matter differently. The following tables show that the majority of adults were males, and the majority of children were females.

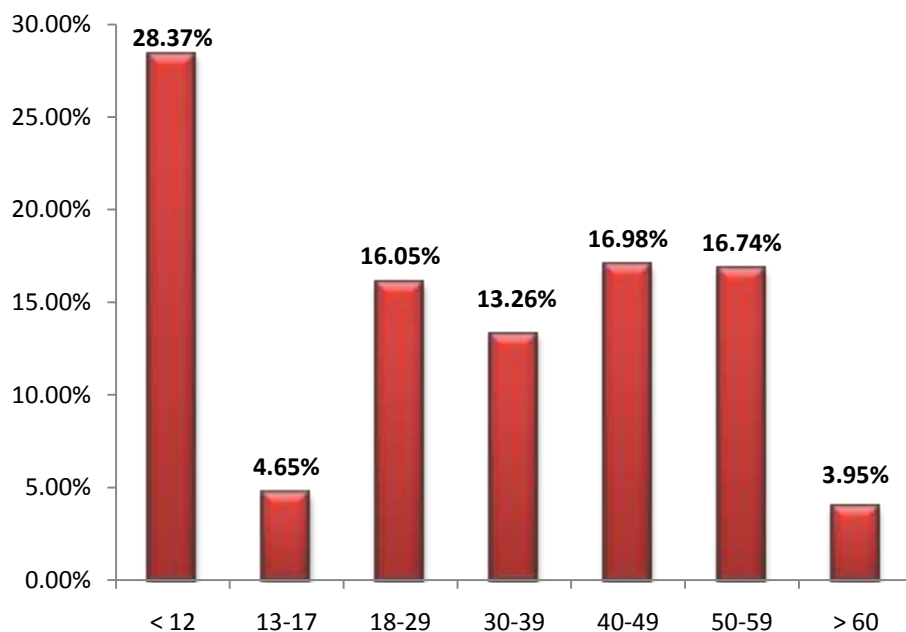


Adults in families were predominately female – nearly 95%. Very few two-parent families received shelter, and for this PIT Count, there were no single father households.

Currently, only one emergency shelter and one transitional housing program offer assistance to homeless families with either two parents or that are single father households. Less than a handful of programs can offer assistance to families with male children over the age of 13.

B. Age

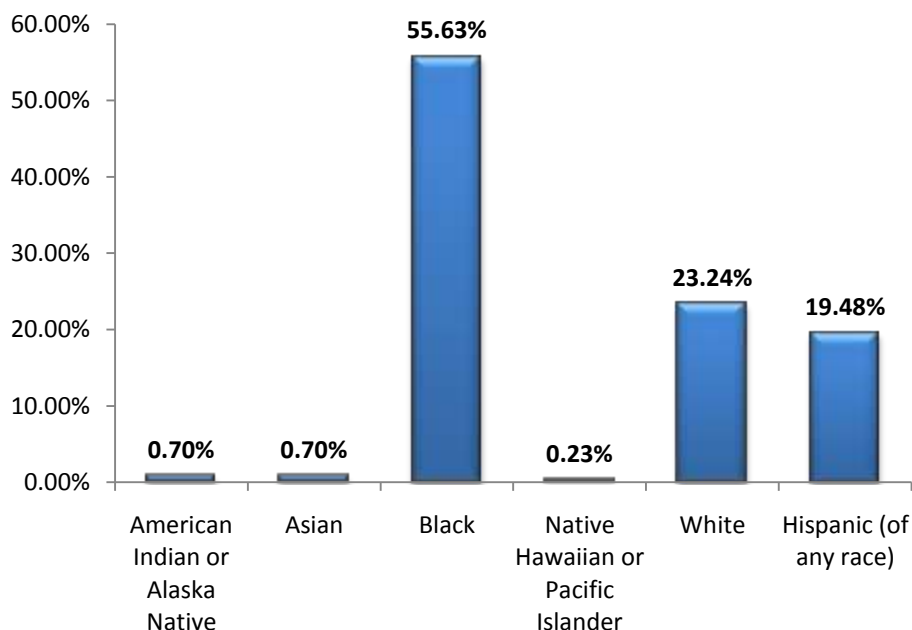
The stereotype in society of a homeless person is a middle aged individual. However, in Lake County, the average homeless person is a child. The following chart shows the age of homeless persons during this PIT Count.



The average homeless person in Lake County is a child.

C. Race

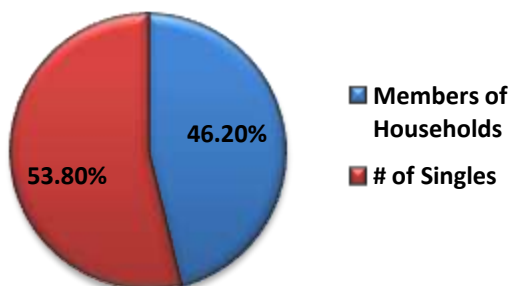
In Lake County, only 12.3% of the population consider themselves Black or African-American. As the chart below indicates, however, a significantly disproportionate percentage of homeless persons consider themselves Black or African-American.



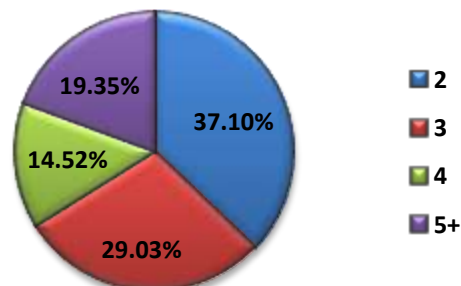
D. Household Type

Throughout this report, much has been done to distinguish the needs of single individuals from those of families. The charts below show the ratio of families to singles, as well as the size of the families.

Families vs. Singles



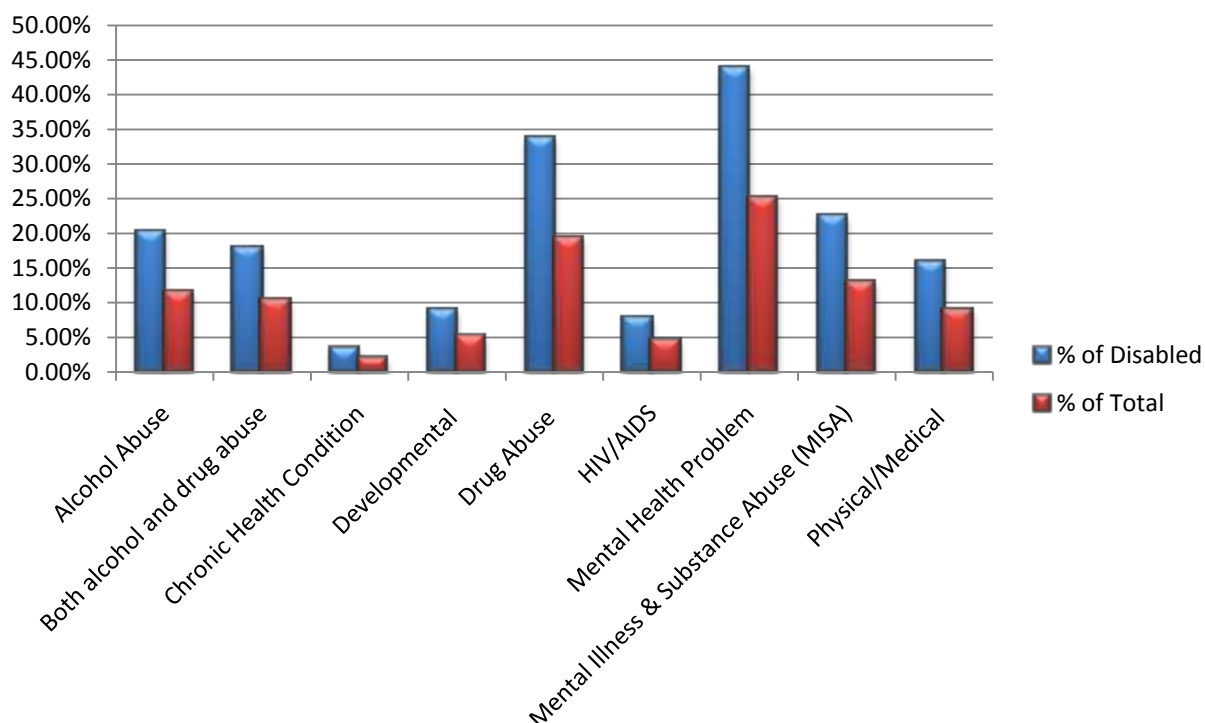
Number of Members per Family



E. Disabilities

For this PIT Count, there were 89 (18.78%) persons with disabilities. Many of these persons had multiple disabilities. The chart below indicates the percentage of persons with each disability. However, due to multiple diagnoses, the sum of the percentages exceeds 100%.

The blue columns represent the number of persons with the specific disability divided by the number of persons with any disability (89). The red columns represent the number of persons with the specific disability divided by the total number of disabilities reported (151).



Two subpopulations that require specialized care in order to exit the cycle of homelessness are those with severe mental illness and those with chronic substance abuse disorders. For this PIT Count, 32 persons were said to be severely mentally ill and 54 were said to be chronic substance abusers. That represents 11.11% and 18.75% respectively of homeless adults. There may be some overlap with those individuals that are dually diagnosed (MISA).

F. Chronically Homeless

In recent years, there has been a dramatic push to assist persons who are known as chronically homeless. A chronically homeless person is a single individual with a disability who has been homeless for an extended period of time. HUD defines a chronically homeless person as: “either (1) an unaccompanied homeless individual with a disabling condition who has been continuously homeless for a year or more, OR (2) an unaccompanied individual with a disabling condition who has had at least four episodes of homelessness in the past three years.” In addition, HUD defines the term *homeless* above as “a person sleeping in a place not meant for human habitation (e.g. living on the streets, for example) OR living in a homeless emergency shelter.” Persons who are in transitional or permanent supportive housing are no longer considered chronically homeless once they enter the program.

Lake County has a number of programs to assist the chronically homeless, including permanent supportive housing beds and transitional housing programs. However, this population remains difficult to engage. They are often wary of accepting assistance. They remain in emergency shelters or the streets for extended periods of time. By doing so, even as a small percentage of the overall population (national averages suggest about 10-20%), they consume a majority of the resources.

For the PIT Count, 48 persons were determined to be chronically homeless. This represents 18.82% of the overall population. However, it also represents 42.86% of the persons who could conceivably be chronic (i.e., single individuals in an emergency shelter).

*48 Persons were
chronically homeless*

*This represents 18.82% of
the overall population.*

*But it also is **42.86%** of
the population that may
be considered chronic by
definition.*

(single individuals in emergency shelter)

G. Veterans

Veterans of the United States Armed Forces tend to be disproportionately represented in the homeless population. In Lake County, the US Census Bureau estimates that approximately 7.7% of adults are civilian veterans. However, 25.69% of homeless adults are civilian veterans.

The North Chicago Veterans Affairs Medical Center houses a majority of these veterans in its programs (59 of 74), while others seek emergency shelter or other forms of housing.

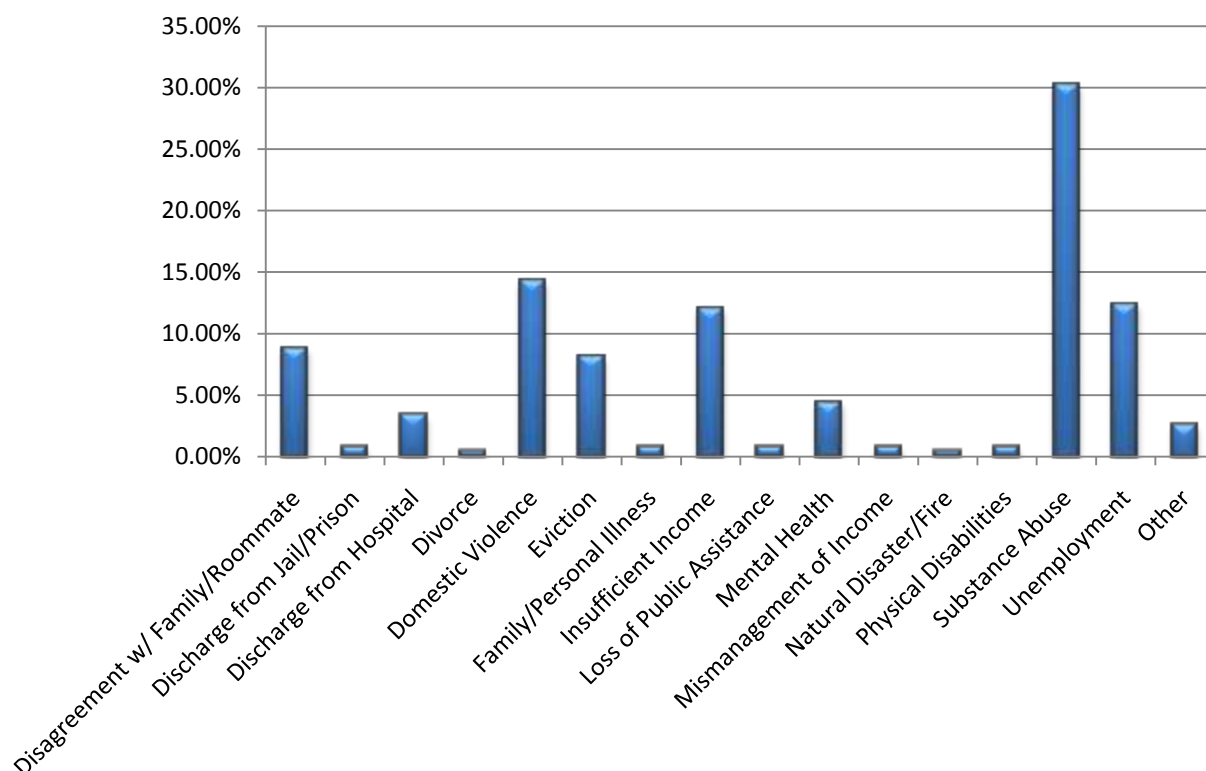
V. WHY?

A. Reasons for Homelessness

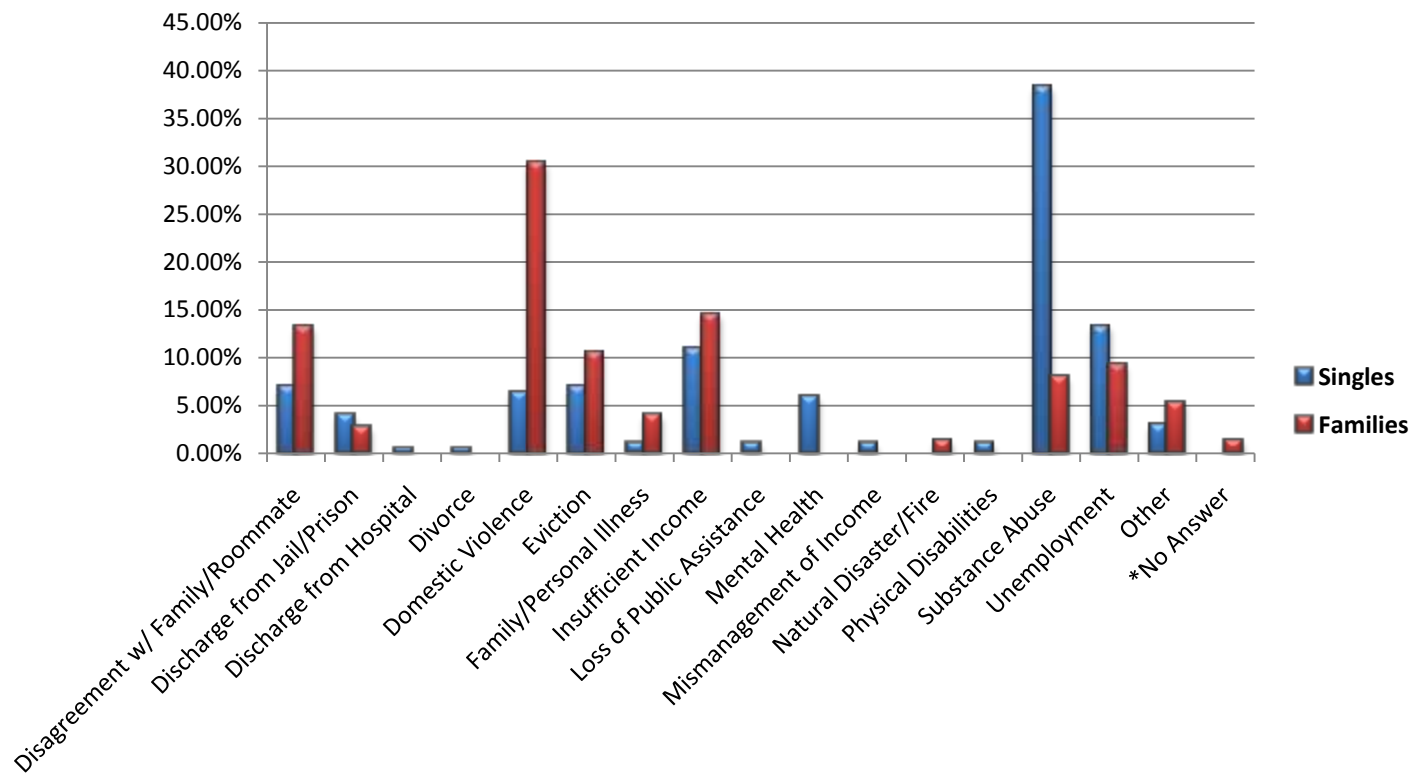
It is very difficult to point to one single reason for why a person becomes homeless. The causes are manifold and complex. There are both structural issues (such as housing costs and the low wage labor market) and individual factors (such as domestic violence and untreated illnesses), which contribute to the problems of homelessness. When people who are homeless are asked to identify reasons for their homelessness, almost all cite several factors. This highlights the complexity of these factors that, working together, cause homelessness.

HUD has developed a rather comprehensive list of reasons for homelessness. Upon intake into a program, homeless persons are asked to pick the primary reason for their own homelessness (*note – only one answer is given per household*). The following tables outline those reasons.

1. Total Responses



2. Responses from Singles & Families



As the table above illustrates, the reasons for homelessness vary greatly between single individuals and families. While a plurality of singles suffer from substance abuse leading them to homelessness, more families become homeless from domestic violence than from anything else.

VI. HOW?

The information gathered from this PIT Count is an important component in program planning. As outlined in the *Introduction* section, this data can help guide the direction of programs, determine unmet need, and/or provide for a better understanding of solutions.

This data will also be utilized to determine progress and possible changes necessary in the Lake County 10-Year Plan to End Homelessness. This plan, approved in 2006, has a vision that “By 2016, all individuals and families facing homelessness in Lake County will have alternatives and access to safe, affordable housing with the resources and supports needed to sustain it.”

A. Ten-Year Plan to End Homelessness

The following is an excerpt from the 10-Year Plan to End Homelessness. The data collected from this PIT Count will help determine future direction with the Plan.

The Lake County, Illinois Partnership to End Homelessness has created a plan that we believe will end chronic homelessness in ten years. By partnering with businesses and civic leaders, clergy, law enforcement, municipal and county government, housing developers, faith-based organizations, consumers, not for profits and foundations in the community, using models from other communities throughout the United States, and moving forward with our plan of action, the partnership is confident that chronic homelessness could be eradicated by 2016. Sharply reducing homelessness and ending chronic homelessness in Lake County is an ambitious, but achievable goal. All too often, emergency shelters, other short-term shelters, and supplementary services offered to homeless people address only the immediate symptoms of homelessness. The Lake County Partnership to End Homelessness has identified the issues, the weaknesses, and the opportunities along with an action plan that will be implemented to eliminate chronic homelessness by the year 2016.

The following goals are included in the Lake County Plan to End Homelessness:

- Lake County has in place an emergency prevention program to prevent eviction and homelessness.
- Lake County has an outreach and engagement system designed to reduce barriers and encourage homeless people to enter appropriate housing.
- Lake County has a sufficient level of high quality supportive services to assist individuals and families to succeed on their own.
- Lake County is implementing a plan to fully address the permanent housing needs of low-income residents.
- Accurate administrative data will be aggregated to understand the nature of homelessness and its solutions. Long range planning will take place with the goal of ending homelessness.
- Lake County will increase the investment and involvement of its residents, businesses, politicians, and faith-based organizations in ending homelessness and transforming Lake County.

VII. Participants

A. Homeless Service Agencies

A Safe Place – www.asafeplaceforhelp.org

Alexian Brothers – The Harbor – www.abam.org

Catholic Charities – www.catholiccharities.net

COOL Transitional Housing – www.coolministries.org

Lake County Haven – www.lakecountyhaven.org

Lake County Residential Development Corporation – www.lcrdcil.org

Maristella – www.maristella.org

North Chicago Veterans Affairs Medical Center – www.northchicago.va.gov

PADS Crisis Services – www.lakecountypads.org

Warren Township – www.warrentownship.net

Waukegan Township Staben Center - www.waukegantownship.com/staben_center.htm

Waukegan Township Staben House - www.waukegantownship.com/staben_house.htm

Lake County Coalition for the Homeless – www.lakecountyhomeless.org

Lake County Community Development – www.lakecountyil.gov/planning/communitydevelopment/default.htm

B. Outreach Teams

Alexian Brothers - The Harbor

Karen Kowal

Krystle Powell

City of Waukegan CDBG

Laura Hamilton

Community Volunteers

Daniel McGrath

Karolyn Reed

Violet Ricker

Fair Housing Center of Lake County

Megan Harrington

Housing Action Illinois

Sharon Legenza

Independence Center

Eric Goldspiel

Lake County Haven

Jennifer Larson

Liz Pleines

Lake County Planning, Building & Development

Tom Chefalo

Peter Duggan

Joel Williams

Maristella

John Broderick

Lisette Delgado

Sonia Mares

North Chicago VA Medical Center

Thomas Keith

PADS Crisis Services

Cathy Curran

David Clemons

Juan Martinez

Leslie James

Melvin Ford

Warren Township Supervisor's Office

Diane Nelson

Glenda White

Sue Simpson

Waukegan Township Staben Center

Richard Freitas

Zion Township Supervisor's Office

Cheri Ditzig